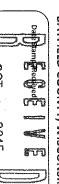
SUBMIT: COMPLETED APPLICATION, TAX

Bayfield County
Planning and Zonling Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



8 13 2015

> Permit #: Date: Refund: Amount Paid:

Bayrinaki Co. Zoning Depi

E # SPECIAL USE   B.O.A.   OTHER	CONDITIONAL USE #  City/State/Zip:  Coort.&  Coort.&  City/State/Zip:  City/State/Zip:  Coort.&  Coo	Mailing Address:  730/ A 4; II  City/State/Zip:  Cc45/e Contractor Phone:  715-492-4/84 Agent Phone:  PIN: (23 digits) 04-018-2-4 CSM Vol & Pag PIN: (23 digits) 104-018-2-4 Remt Incl. Internition If yes—continue— If yes—continu	P. C. ND SALE TO SALE	IT REQUESTED	TYPE OF PERMIT REQUESTED—> Owner's Name:    \( \lambda \) ill\\ \( \rangle \)   \( \rangle \)
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Authorized Agent:

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date

N 50

Date

en ritu

are signing on behalf of the owner(s) a letter of authorization must accompany this application)

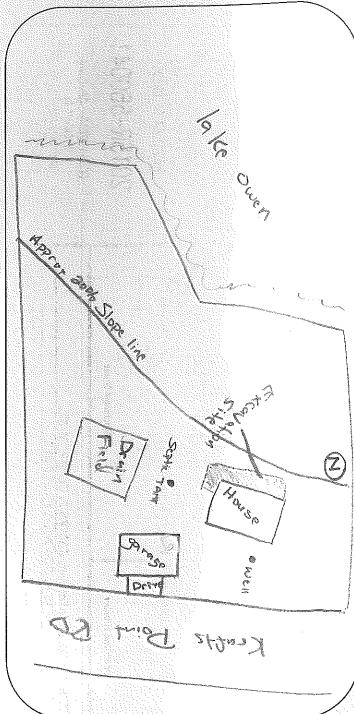
282

Aftach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Address to send permit

Rosser

- Show Location of: Show / Indicate:
- Show Location of (\*):
- Show:
- Show:
- Show any (\*): Show any (\*):
- Proposed Construction
  North (N) on Plot Plan
  (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
  All Existing Structures on your Property
  (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
  (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
  (\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

			eet	w/∆ Feet	Setback to <b>Privy</b> (Portable, Composting)
			eet	30 Feet	Setback to <b>Drain Field</b>
Feet	00	Setback to Well	Feet	7 2 5 6	Setback to Septic Tank or Holding Tank
Feet		Elevation of Floodplain	eet	H) Feet	Setback from the East Lot Line
No	<b>™</b> Yes	20% Slope Area on property	Feet	88 F	Setback from the West Lot Line
Feet		Setback from Wetland	Feet	16 1	Setback from the <b>South</b> Lot Line
			Feet	1 OC	Setback from the <b>North</b> Lot Line
Feet	~/A	Setback from the Bank or Bluff			
Feet	I.	Setback from the River, Stream, Creek	Feet	T	Setback from the Established Right-of-Way
Feet	26 00	Setback from the Lake (ordinary high-water mark)	Feet		Setback from the Centerline of Platted Road
ement	Measuremen	Description		Measurement	Description

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be mean other previously surveyed corner or marked by a licensed surveyor at the owner's expense. ired must be visible from one previously surveyed corner to the

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner; or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

## (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	-	# af bedrooms:	Sanitary Date:	
Permit Denied (Date):	Reason for Denial:				
Permit #: 1/5-0438 Pe	Permit Date: //_6_/				
Is Parcel a Sub-Standard Lot   Pes (Deed of Record)     Is Parcel in Common Ownership   Yes (Fused/Contiguous Lot(s))   Is Structure Non-Conforming   Yes   Yes	No No	Mitigation Required Mitigation Attached	□Yes \\No □Yes \\No	Affidavit Required Affidavit Attached	□ Yes \\ No □ Yes \\ No
Granted by Variance (B.O.A.)    Yes     No   Case #:	Pı	Previously,Granted by Variance (B.O.A.) ☐ Yes ☐ No	4.	Case #:	
Was Proposed Building Site Delineated		Were Property Line	Were Property Lines Represented by Owner Ay	ner Ayes	□ No
Inspection Record: $ ho \mu$				Zoning District Lakes Classification	( <b>b</b> )
Date of Inspection: $q-/\gamma/\varsigma$ In	Inspected by: Hours	9		Date of Re-Inspection:	tion:
Condition(s): Town, Committee or Board Conditions Attached? Tres Two-(If No they peed to be attached.) Must in study sith tenu prior to ourset of Project Must shall be sith white Eris; ourset of Project Must use best Manysmust Practics	Practist  to ouser  to reserve  to ouser	hey peed to be attac Of Physic O	hed.)		
Signature of inspector:				Date of Approval: M	val: 11 - 17.65
Hold For Sanitary:	Hold For Affidavit:		Hold For Fees:		O MANGARANA AMARANA MANGARANA AMARANA